

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. 1061

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEETSubstitute for Form PTO-1360
(For use with Form PTO/SB/06)

Application Number

101003,660

Filing Date

Applicant(s)

7/26/04

8/9/04

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
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49						
50						
Total Indep	2		3		3	
Total Depend	8	8	16	16	16	16
Total Claims	10		19		19	

	*	*	*	*	*	*
51	Indep	Depend	Indep	Depend	Indep	Depend
52						
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94	*					
95						
96						
97						
98						
99						
100						
Total Indep						
Total Depend						
Total Claims						

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

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MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEETSubstitute for Form PTO-1360
(For use with Form PTO/SB/06)

Application Number

10/603,660

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
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49						
50						
Total Indep	3					
Total Depend	16					
Total Claims	19					

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99				
100				
Total Indep				
Total Depend				
Total Claims				